



Local History Room Deed of Gift & Donation Form

Mary Riley Styles Public Library

120 N. Virginia Avenue, Falls Church, VA 22046

703-248-5140 (TTY 711) www.fallschurchva.gov/library

1. Donor Information

Name			
Street			
City			
State		Zip Code	
Phone		Email	

2. Brief Description/Inventory of Donated Items

☐ Additional Descriptions included on Appendix

3. Copyright

Do you hold the copyright to the material being donated?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If you do own the copyright to the material, do you wish to assign copyright to the Mary Riley Styles Public Library?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Notes/Comments Re Copyright (optional):

4. Terms of Donations

- (1) Donations are transferred irrevocably and absolutely to the Mary Riley Styles Public Library (MRSPL) and will not be returned once donated.
- (2) All materials are donated without any use restrictions. MRSPL reserves the right to decide how and under what circumstance donated items will be retained, arranged, stored, preserved, described, cataloged, digitized, and exhibited. (If specific use restrictions are required, they must be negotiated in advance and approved separately in writing by the MRSPL Library Director.)
- (3) Any appraisal or establishment of any item's value for tax purposes is the responsibility of the donor and must be completed before the item is donated.
- (4) In the event that the donor gives additional items to the library in the future, a separate "Local History Room Deed of Gift & Donation Form" must be completed for the new items.

5. Donor Signature & Date

I represent and warrant that I am the sole owner of the materials described above; that I have full right, power, and authority to give the materials to Mary Riley Styles Public Library; and that the information I have provided is accurate.

I acknowledge that I have read, understand, and agree to all "Terms of Donation" (Section 4 above) specified on this form. By my signature below, I hereby voluntarily give the materials described above to the Mary Riley Styles Public Library.

Donor Signature		Date	
Staff Witness		Date	

6. Staff Processing

Verified all materials as described	<input type="checkbox"/> YES
Has the donor been offered a copy of the signed form?	<input type="checkbox"/> YES
Has the donation been entered in the Donation Log?	<input type="checkbox"/> YES
Has a copy of this signed form been scanned and filed electronically?	<input type="checkbox"/> YES
Has a thank you letter been sent to the donor?	<input type="checkbox"/> YES

Appendix

Please use this space to elaborate on any additional descriptions of the donated materials listed above.